

### STATEMENT OF DESIGNATION OF COUNSEL Please use one form for each Respondent/Entity/Treasurer FAX (202) 219-3923

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FEDERAL ELECTION COMMISSION

MUR # 6484	9
NAME OF COUNSEL: Kirk Jones Matthew Sanderson	23
FIRM: Caplin + Drysdale	
ADDRESS: 1 Thomas Circle, NW, Washington DC 20005	
TELEPHONE- OFFICE (202) BLO - 5046	
FAX (202) 429 - 3301	

The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

7/39/3011 Date	Respondent/Agent -Signature	Treasurer/Oandidate/Owner)
NAMED RE	SPONDENT: Shauna Polk	
MAILING AI (Please Prir	DDRESS: 1 Thomas Circle, Nhi	1, Washington DC 20005
т	ELEPHONE- HOME ()	
	BUSINESS ( <u>202) 429 - 3306</u>	

Information is being sought as part of an investigation being conducted by the Federal Election Commission and the confidentiality provisions of 2 U.S.C. § 437g(a)(12)(A) apply. This section prohibits making public any investigation conducted by the Federal Election Commission without the express written consent of the person under investigation



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MUR # <u>6484</u>	
NAME OF COUNSEL: Kirk Jones Matthew Sanderson	
FIRM: Caplin of Drysdale	
ADDRESS: 1 Thomas Circle Nil, Washington DC	20005
TELEPHONE- OFFICE (302) 862-5046	-
FAX (202) 429 - 3301	

The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

Date Respondent Signature	Treasurer/Candidate/Owner)
NAMED RESPONDENT: The Commonweall	n PAC- Alabama
MAILING ADDRESS: 1 Thomas Circle NE (Please Print)	1 Washington DC 20005
TELEPHONE- HOME ()	
BUSINESS (202) 429 - 3306	<u> </u>

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MUR # 6484		를 9:
NAME OF COUNSEL: <u>Lirk Jowers</u> Matthew Sandarso	17	: 24
FIRM: Caplin or Drysdale		
ADDRESS: 1 Thomas Circle, NW Washington DC	2000	5
TELEPHONE- OFFICE (202) 862 - 5046		
FAX (363) 429 - 3301		

The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

7/34/3011 Dale	Respondent/Agent -Signature	Treasurer Title (Treasurer/Candidate/Owner)
NAMED RES	PONDENT: The Commonwe	alth PAC - Lowa
MAILING ADI (Please Print	DRESS: 1 Thomas Circle 1	Ull Washington DC 20005
TE	LEPHONE-HOME ()	

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MUR # 6484	: 24
NAME OF COUNSEL: Kirk Jours / Matthew Sanders or	~
FIRM: Caplin of Drysdale	
ADDRESS: 1 Thomas Circle, NW, Washington DC .	J0005
· · · · · · · · · · · · · · · · · · ·	
TELEPHONE- OFFICE (202) 862-5046	
FAX (202) 429 - 3301	
The above-named individual and/or firm is hereby designated as my counsel authorized to receive any notifications and other communications from the Committo act on my behalf before the Commission.	
Date Respondent Agent - Signature Title (Treasurer/Candid	er date/Owner)
NAMED RESPONDENT: The Commonwealth PAC - Michi	igan
MAILING ADDRESS: 1 Thamas Circle NW klashington D (Please Print)	_20005
TELEPHONE-HOME ()	·

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MUR # 6484	24	Z
NAME OF COUNSEL: Kirk Lowers / Matthow Sanderson		
FIRM: Caplin & Drysdale		
ADDRESS: 1 Thomas Circle, NIL, Washington DC	30005	
TELEPHONE OFFICE (202) 862 - 5046		
FAX (202) 429 - 3301		
The above-named individual and/or firm is hereby designated as my counsel a authorized to receive any notifications and other communications from the Commiss to act on my behalf before the Commission.		
Date Respondent/Agent -Signature Title(Treasurer/Candida	ite/Owner)	
NAMED RESPONDENT: The Commonwealth PAC-New Ha	mpshire	, )
MAILING ADDRESS: I Thomas Circle Ned Washington (Please Print)	DC 200	)OS
TELEPHONE- HOME ()		
BUSINESS (202) 429-3306		

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NAME OF COUNSEL: <u>Lirk lowers</u> ) Matthew Sanderson 9
FIRM: Caplin + Drysdale.
ADDRESS: 1 Thomas Circle NW, Washington DC 20005
TELEPHONE- OFFICE (303) 863 - SO46
FAX (203) 429 - 3301
The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.
Date Respondent/Agent -Signature Title (Treasurer/Candidate/Owner)
NAMED RESPONDENT: The Commonwealth PAC-South Carolina
MAILING ADDRESS: 1 Thomas Circle UK, Washington DC 20005 (Please Print)
TELEPHONE- HOME ()

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